

## **STATE OF MAINE Bureau of Insurance**

34 State House Station Augusta, ME 04333-0034

## APPOINTMENT OF RESIDENT AGENT TO RECEIVE SERVICE OF PROCESS

Name of Reinsurance Intermediary		Company's State of Maine License #	
Name of Agent to Receive Service of Process (Must be an agent located in Maine)			siness Phone
Street Address of Agent	City	Zip	
with its principal place of business in authorized to transact business in the State of 1), to serve as its agent to receive service of lagent is hereby authorized and empowered to raken and held as valid as if served upon the co	Maine, hereby egal process is eceive and ac	appoints the above, pursuant ssued against it in the State of cept such service of process ar	to 24-A M.R.S.A. § 42 <sup>r</sup> Maine. The forenamed and such service shall be
	Signature	e of Principal Officer	
	Type or F	Print Name of Principal Officer	
	Title		